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PTO/SB/05 (4/98)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No.	MI22-1246
	First Inventor or Application Identifier	Scott E. Moore
	Title	Semiconductor Processor Systems, ...
	Express Mail Label No.	EL465678097US

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
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- | | |
|--|---|
| 1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17)
<small>(Submit an original and a duplicate for fee processing)</small>
2. <input checked="" type="checkbox"/> Specification [Total Pages 83]
<small>(preferred arrangement set forth below)</small>
- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 20]
4. Oath or Declaration [Total Pages 3]
a. <input checked="" type="checkbox"/> Newly executed (original or copy)
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d))
<small>(for continuation/divisional with Box 16 completed)</small>
i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u>
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). | 5. <input type="checkbox"/> Microfiche Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission
<small>(if applicable, all necessary)</small>
a. <input type="checkbox"/> Computer Readable Copy
b. <input type="checkbox"/> Paper Copy (identical to computer copy)
c. <input type="checkbox"/> Statement verifying identity of above copies |
|--|---|

*** NOTE FOR ITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

ACCOMPANYING APPLICATION PARTS	
7. <input checked="" type="checkbox"/>	Assignment Papers (cover sheet & document(s))
8. <input type="checkbox"/>	37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small>
9. <input type="checkbox"/>	English Translation Document (if applicable)
10. <input type="checkbox"/>	Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
11. <input type="checkbox"/>	Preliminary Amendment
12. <input checked="" type="checkbox"/>	Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>
13. <input type="checkbox"/>	* Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application <small>(PTO/SB/09-12)</small> Status still proper and desired
14. <input type="checkbox"/>	Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>
15. <input checked="" type="checkbox"/>	Other: <u>Check; Power of Attorney by Assignee.</u>

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input checked="" type="checkbox"/> Continuation-in-part (CIP)	of prior application No: 09 / 324,737
Prior application information: Examiner		W. Berry	
Group / Art Unit:		3723	

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		021567 <small>(Insert Customer No. or Attach bar code label here)</small>	
		or <input type="checkbox"/> Correspondence address below	
Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

Name (Print/Type)	James D. Shaurette	Registration No. (Attorney/Agent)	39,833
Signature	<i>[Signature]</i>	Date	3/1/00

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FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

See 37 C.F.R. §§1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$) 3,628.00**Complete if Known**

Application Number	Unknown
Filing Date	Unknown
First Named Inventor	Scott E. Moore
Examiner Name	Unknown
Group / Art Unit	Unknown
Attorney Docket No.	MI22-1246

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:
- Deposit Account Number 23-0925
- Deposit Account Name Wells, St. John, Roberts
- ☒ Charge Any Additional Fee Required Under 37 C.F.R. §§ 1.16 and 1.17 ☐ Charge the Issue Fee Set in 37 C.F.R. §1.18 at the Mailing of the Notice of Allowance

2. ☒ Payment Enclosed:
- ☒ Check ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	790	201	395	Utility filing fee	690.00
106	330	206	165	Design filing fee	
107	540	207	270	Plant filing fee	
108	790	208	395	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1)					(\$ 690.00)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
129	-20** = 109	18.00	1962.00
Independent Claims	15 - 3** = 12	78.00	936.00
Multiple Dependent			0

**or number previously paid, if greater; For Reissues, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	22	203	11	Claims in excess of 20
102	82	202	41	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	82	209	41	** Reissue independent claims over original patent
110	22	210	11	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 2,898.00**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	0.00
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	0.00
139	130	139	130	Non-English specification	0.00
147	2,520	147	2,520	For filing a request for reexamination	0.00
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	0.00
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	0.00
115	110	215	55	Extension for reply within first month	0.00
116	400	216	200	Extension for reply within second month	0.00
117	950	217	475	Extension for reply within third month	0.00
118	1,510	218	755	Extension for reply within fourth month	0.00
128	2,060	228	1,030	Extension for reply within fifth month	0.00
119	310	219	155	Notice of Appeal	0.00
120	310	220	155	Filing a brief in support of an appeal	0.00
121	270	221	135	Request for oral hearing	0.00
138	1,510	138	1,510	Petition to institute a public use proceeding	0.00
140	110	240	55	Petition to revive - unavoidable	0.00
141	1,320	241	660	Petition to revive - unintentional	0.00
142	1,320	242	660	Utility issue fee (or reissue)	0.00
143	450	243	225	Design issue fee	0.00
144	670	244	335	Plant issue fee	0.00
122	130	122	130	Petitions to the Commissioner	0.00
123	50	123	50	Petitions related to provisional applications	0.00
126	240	126	240	Submission of Information Disclosure Stmt	0.00
581	40	581	40	Recording each patent assignment per property (times number of properties)	40.00
146	790	246	395	Filing a submission after final rejection (37 CFR 1.129(a))	0.00
149	790	249	395	For each additional invention to be examined (37 CFR 1.129(b))	0.00
Other fee (specify) _____					0.00
Other fee (specify) _____					0.00

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 40.00**SUBMITTED BY**

Typed or Printed Name James D. Shaurette
Wells, St. John, Roberts, Gregory & Matkin P.S.

Signature [Signature]

Date 3/1/00**Complete (if applicable)**

Reg. Number 39,833

Deposit Account User ID _____

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PTO/SB/21 (6-98)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

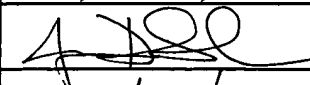
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/517,127
	Filing Date	March 2, 2000
	First Named Inventor	Scott E. Moore et al.
	Group Art Unit	Unknown
	Examiner Name	Unknown
Total Number of Pages in This Submission	Attorney Docket Number MI22-1246	


ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): Check for \$130.00 Return Postcard Receipt Check for \$40.00 Declaration of Invention
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	James D. Shaurette, Reg. No. 39,833 Wells, St. John, Roberts, Gregory & Matkin, P.S.
Signature	
Date	6/21/00

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 6-21-00	
Typed or printed name	Natalie King
Signature	
Date	6-21-00

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